

In re Application of:

Docket No. 00862.022078

file only

YUKIYOSHI HIKICHI

Application No.: 09/745,480

Examiner: Jerome Grant II

Filed: December 26, 2000

Group Art Unit: 2626

For: IMAGE PROCESSING
APPARATUS, CONTROL
METHOD THEREFOR, AND
IMAGE PROCESSING SYSTEM

Date: December 22, 2004

Mail Stop Amendment
THE COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

03/18/2005 DBELL1 00009004 061205 09745480
Transmitted herewith is an Amendment in the above-identified application.
01 FC:1201 200.00 DA

☒ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 32	MINUS	** 32	= 0	x \$25 \$50	\$0
INDEP. CLAIMS	* 7	MINUS	*** 7	= 0	x \$100 \$200	\$0
Fee for Multiple Dependent claims \$180°/\$360						\$0
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$0

- * If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

☐ Verified Statement claiming small entity status is enclosed, if not filed previously.

☐ A check in the amount of \$_____ is enclosed.

☐ Charge \$_____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.

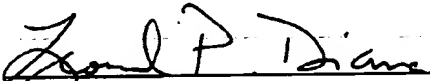
☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.

☐ A check in the amount of \$_____ to cover the fee for a ____-month extension is enclosed.

☐ A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.

☒ Applicant's undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.

Respectfully submitted,


Leonard P. Diana
Attorney for Applicant
Registration No. 29,296

FITZPATRICK, CELLA, HARPER & SCINTO
30 Rockefeller Plaza
New York, New York 10112-3801
Facsimile: (212) 218-2200

NY_MAIN 472121v1

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875						Application or Docket Number 09/745480	
CLAIMS AS FILED - PART I (Column 1) (Column 2)							
FOR	NUMBER FILED	NUMBER EXTRA			SMALL ENTITY	OR	OTHER THAN SMALL ENTITY
BASIC FEE (37 CFR 1.16(a))					RATE		RATE
TOTAL CLAIMS (37 CFR 1.16(c))	minus 20 =	•			FEE		FEE
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 3 =	•					
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))							
* If the difference in column 1 is less than zero, enter "0" in column 2.							
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							
AMENDMENT A	12/27/04	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
	Total (37 CFR 1.16(c))	• 32	Minus	** 32	=		
	Independent (37 CFR 1.16(b))	• 8	Minus	*** 7	= 1		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						
	1, 12, 14, 15, 17, 28, 30, 31						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
	Total (37 CFR 1.16(c))	•	Minus	**	=		
	Independent (37 CFR 1.16(b))	•	Minus	***	=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
	Total (37 CFR 1.16(c))	•	Minus	**	=		
	Independent (37 CFR 1.16(b))	•	Minus	***	=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						
					RATE	ADDITIONAL FEE	
					x \$ 25 =		RATE
					x \$ 100 =		ADDITIONAL FEE
					+ \$ 180 =		RATE
					TOTAL		ADDITIONAL FEE
					ADD'L FEE		ADDITIONAL FEE

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.